OR

OR

TOTAL

ADD'L FEE

Ů	nder the Paperw	vork Reduction Act	of 1995,	no persons are rec	ulred to respond	to a collection of	information un	less it displ	lays a valid OME	CONTRA NITH
Under the Paperwork Reduction Act of 1995, no persons are required to respond to PATENT APPLICATION FEE DETERMINATION Substitute for Form PTO-875)	Application or Docket Number		
		CLAIMS A	S FILEC	PARTI	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
	FOR	NUM	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE
	SIC FEE CFR 1.16(a))						\$	OR		s
TOTAL CLAIMS 37 CFR 1.16(c))			minus :	20 = .		х \$:	OR	X \$ =	
NDEPENDENT CLAIMS 37 CFR 1.16(b))		IMS	minus 3 = '			x \$		OR	x \$ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+5		OR	+5 =	
If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL	 -
										<u> </u>
		CLAIMS AS AN	NENDE) - PART II	BE	ST AVA	LABLE	COF	ΟΥ OTHE	R THAN
		(Column 1)		(Column 2)	(Column 3)	SMAL	L ENTITY	- GR		ENTITY
۷ 2		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ĭ	Total (37 CFR 1.16(c))	28	Minus	20	= 8	x \$=		OR	x s /8 =	144
AMENOMEN	Independent (37 CFR 1.16(b))	16	Minus	" 12	= 4	x \$=		OR	x \$ 84 =	336
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+5 =		OR	+5 =	
	·			•		TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	480
2	1306	(Column 1)		(Column 2)	(Column 3)			_		Pd.
0		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO POLICINA	Total (37 CFR 1.16(c))	. 33	Minus	-28	=	x s=		OR	× 50 =	257)
	Independent (37 CFR 1.16(b))	12	Minus	16	-0	x s=		OR	x s =	
AME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(dj)					+s =		OR	+5 =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	35Up
		(Column 1)		(Column 2)	(Column 3)			-		<u>-</u>
)		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ĭ	Total (37 CFR 1,16(c))	•	Minus	**	=	x s =		OR	x \$ =	
	Independent (37 CFR 1,15(b))	•	Minus	•••	=	x \$=		OR	x s =	
, L		L		1		· · · • — -	1	,	•	L

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

TOTAL

ADD'L FEE

[•] If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.